## SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN



Permit #: Date: Refund: Amount Paid: #75 8-28-16 6 8

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS Bayfield Co. Zoning Dept.

Secretarial Staff			Hec'd for Issuance	Municipal Use			Commercial Use				Residential Use	٦.		Proposed Use	Existing Structure: (If permit being applied for is relevant to it) Proposed Construction:		] 	20				X Z	Value at Time of Completion *include donated time &		☐ Shoreland ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	0	Section 3 L	NE 1/4, UN	PROJECT LOCATION LEE	Authorized Agent: (Person	HO CHILLINGS			Owner's Name:	TYPE OF PERMIT REQUESTED>
		]		<b>X</b>		_	3							<	permit being n:		Property	Run a Business on	Relocate (existing bldg)	Conversion	Addition/Alteration	New Construction	Project		ls Property/I	Is Property/I sek or Landv	, Township _	1/4	Legal Description:	erson Signing Application on behalf of Owner(s))  OTHMEND	1050	OF NO 15	toor		STED-
Other: (explain)	Special Us Condition:		Accessory	Accessory Building	Addition/	Mobile Ho	Rinkhous						Principal S Residence		applied for	-		ess on	sting bldg)		eration	uction			and within	and within vard side of	45 N	Gov't Lot		tion on behalf		M	١	•	☐ LAND USE
plain)	Special Use: (explain) Conditional Use: (explain)		Accessory Building Addition/Alteration (specify)		Addition/Alteration (sp	Mobile Home (manufactured date)	with Attached Garage	with (2"") Deck	with a Deck	with (2 <sup>na</sup> ) Porch	with a Porch	with Loft	Principal Structure (first structure on property) Residence (i.e. cabin, hunting shack, etc.)		is relevant to it		☐ Foundation	No Basement	☐ Basement		☐ 1-Story + Laft	X 1-Story	# of Stories and/or basement		☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes—continue	Is Property/Land within 300 feet of River, Stream (inc. Intermittent) Creek or Landward side of Floodplain?  If yes—continue—	N, Range	Lot Lot(s)	(Use Tax Statement)	of Owner(s))		2			
			tion/Alte	(specify)	(specify)	red date)	Gara	ck	-	rch			structure	Pro		-	3	ent					s		te, Pond o	r, Stream	`\   	i ≨l	PIN: (23 digits)	Agent Phone:	7155500		2430 Q	>	SANITARY
MI-N-	and the second s		ration (specify)	GARAS		2)	eening quarters						e on property) ck, etc.)	Proposed Structure	Length: <b>784-27</b> Length:					1		Seasonal	Use		Pond or Flowage If yescontinue	tream (ind. Intermittent)	Town of:  Bariets	Vol & Page	-60-5	2000	OK37	25	1	•	□ PRIVY □
				A		e coming	Cooking							.e	37			X None			- 1	□ <b>1</b>	edrooms	_	Distance Strue	Distance Structure	( * )	_	36-2 01-06	Agent Mailing Ado	Flumber:	5	Street Liph	City/	CONDITIONAL USE
SEPTIME TO SEPTIME SEP						000 to 00	& food prep facilities)								Width: 25	None	i i	☐ Portable (w/service con	☐ Privy (Pit) or		- 1	☐ Municipal/City	Sev		Distance Structure is from Shoreline:	ture is from Shoreline :			;;	Agent Mailing Address (include City/State/Zip):	THE STATE OF THE S	5L8h	Whitehen	늉	
		-	-	  -			Ps										oilet	v/service	i			City	What Typ wer/Sanitar is on the pro		oreline : feet	oreline : feet	Lot Size	Subdivision	Recorded D	/State/Zip			K		SPECIAL USE
×	×××	<	×	× 4/2/	×	×	×   >	< ×	×	×	×	×	××	Dimensions				contract)	/aulted (	Specify Type:	ecify Type		What Type of Sewer/Sanitary System Is on the property?					ision:	L	80	arthurand development described		Mors		Е □ В.О.А.
			<u>  -</u>	(7.2×	)		-		1		_	)	_	sions	Height: /				Vaulted (min 200 gallon)	e:	Specify Type: Correl.		rem		□ Yes	Is Property in Floodplain Zone?	Acreage		Page(s)	Written A Attached Yes	Piumper	65/336-	Cell Phone:	Telephone:	О.А. 🗆
				268										Square Footage	6				n)   (nc		X Well	☐ City	Water		□ Yes	Are Wetland Present?	So 4		perty Ownership	Written Authorization Attached Yes	Thone:	56-1880	le:	ne:	THER

Owners must sign or letter(s) of authorization must accompany this application) Date Date

FAILURE TO OBTAIN A PERMIT ON STRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

Am (are) responsible for the detail and accuracy of all information (we) and (see) new accompanying information (we) am (are) providing and belief it is true, corner in true to return the first true to return the first true in the permitten (we) am (are) providing and the first true in the relied upon by Bayfied country in determining whether to issue a permit. (I/we) further accept fiability which may be a result of Bayfied country relying on this information I (we) am (are) providing in or with this application. I (we) consent to country officials charged with administering country ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Address to send permit

(If yo

are signing

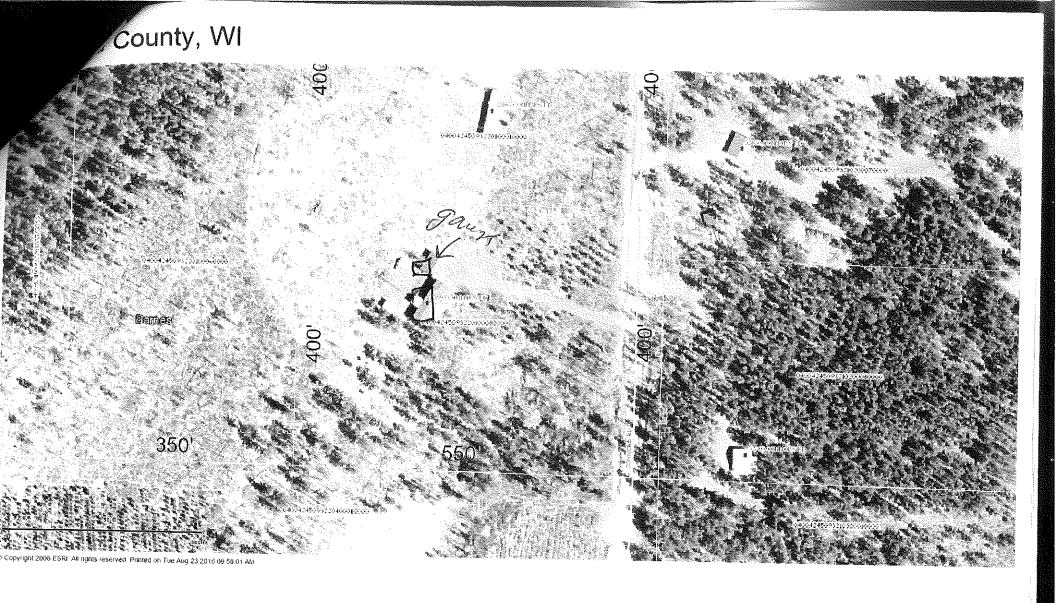
on behalf of the owner(s) a letter of authorization must accompany this application)

Authorized Agent:

Owner(s):

(If there are Multiple Ow

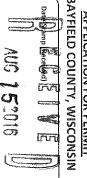
Hold For Sanitary: 🗆 🔲 Hold For TBA:	Signature of Inspector: Office Only	No water and prosser	Date of Inspection: 473/6 Ins	Inspection Record: Bidy Sta	Was Parcel Legally Created   27   Was Proposed Building Site Delineated   27	Granted by Variance (B.O.A.) ☐ Yes No Case #:	nt □ Yes p □ Yes g □ Yes	Permit #: 16-027S	Issuance Information (County Use Only) Permit Denied (Date):	(9) Stake or Mark Propose  NOTICE: All Land  For The Construction Of N	other previously surveyed corner or marked by a licensed surveyed corner or marked by a licensed surveyed to the placement or construction of a structure more that one previously surveyed corner to the other previously surveyed surveyor at the owner's expense.	Setback to <b>Privy</b> (Portable, Composting) Fe	Setback to Septic Tank or Holding Tank	Setback from the <b>West</b> Lot Line Setback from the <b>East</b> Lot Line	Setback from the <b>North</b> Lot Line Setback from the <b>South</b> Lot Line	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way	Description	Please complete (1) – (7) above (prior to continuing)  (8) Setbacks: (measured to the closest point)			(1) Show Location of: (2) Show / Indicate: (3) Show Location of (*): (4) Show: (5) Show: (6) Show any (*): (7) Show any (*):
BA: Hold For Affidavit:			Inspected by: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Haled ok.	ZYes 0 No Were Pr	Previously   O Yes Z	6 6	25-16	nly) Sanitary Number: Reason for Denial:	Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code The Iocal Town, Village, City, State or Federal agencies may also require permits.	et from the r	et	et	みは Feet 20% Slo つまる Feet Elevatio	Feet	Teet Feet	Measurement	o continuing) the closest point)		The Charles and the Contract of the Contract o	Proposed Construction North (N) on Plot Plan  (*) Driveway and (*) Frontage Road (Name Frontage Road) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (*) Wetlands; or (*) Slopes over 20%
Hold For Fees:	Date		Date	Zoning District Lakes Classifica	Were Property Lines Represented by Owner <b>27es</b> Was Property Surveyed <b>27es</b>	Previousl∜ Granted by Variance (B.O.A.)  ☐ Yes Z No  Case #:	□ Yes	0	# of bedrooms: Sanitary	7 72 7	monly him from which the selection must be measured into the setback must corrected compass from a known corner within 500 feet of the proposed significant corner within 500 feet of the 500 feet o		Setback to Well	20% Slope Area on property  Elevation of Floodplain	<from td="" wetland<=""><td>Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff</td><td>Description</td><td>Changes in plans must be approved by the Planning &amp; Zoning Dept.</td><td></td><td>)</td><td>olding Tank (HT) and/or (*)</td></from>	Setback from the Lake (ordinary high-water mark) Setback from the River, Stream, Creek Setback from the Bank or Bluff	Description	Changes in plans must be approved by the Planning & Zoning Dept.		)	olding Tank (HT) and/or (*)
	te of Approval: 8 24-16		of Re-Inspection:	Zoning District Lakes Classification( 人文文)	□ No		Required   Yes Z'No Attached   Yes Z'No		y Date:	Privy (P), and Well (W).  Jr.  Elling Code.	must be measured must be visible from seed site of the structure, or must be	-	Feet	Yes No		Feet Feet Feet	Measurement	the Planning & Zoning Dept.			Privy (P)



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PO Box 58
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APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN



Bayfield Co. Zoning Dept

752018

Permit #: Refund: Amount Paid: #390 R. # 7568

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ONOT START CONSTRUCTION ON IL ALL PERMITS HAVE BEEN B	TION UNIT ALL	PEKWIISHAY	1 050		25. 30. 00. 00. 00. 00. 00. 00. 00. 00. 00	**************************************		8		
I YPE OF PERMIT KEQUESTED <b>&gt;</b> Owner's Name:		LANDUSE	Ē	Mailing Address:	City/State/i	(þ:	SPECIAL USE		Telepho	Telephone: CLOU,
Jack and	Tami	Hot	+	7	Str C	ameron WI		54824	7/5-7	7/5-790-0308 iell Phone:
2320 Pick	ckerel La	ake Rd		Barnes, W	1 548	73			7/5-7	255-790-0323
J.	endric	.KS		Contractor Phoné: ハS- みみん-(8ん3	Plumber:	Friedel			Plumber Phone: 7 (5- 637	Phone: (037-3026)
Authorized Agent: (Person Signing Application on behalf of Owner(s))	on Signing Appli	sation on behalf	f of Owner(s))	Agent Phone:		Agent Mailing Address (include City/State/Zip):	itate/Zip		Written Al Attached	Written Authorization Attached Yes No
PROJECT LOCATION	Legal Description:		(Use Tax Statement)	PIN: (23 digits) 04- OC닉 - 2- 닉닉	44-09-05-2	05.002-	Recorded Volume	Recorded Document	:: (i.e. Pro Page	Document: (i.e. Property Ownership)
1/4,	1/4	Gov't Lot	\$ [8]   \$ [8]   \$ [4]	CSM Vol & Page	age Lot(s) No.	- 1	Subdivision	ision:		
Section 5	, Township	~	N, Range 9	w Town of:	ot: Darnes		Lot Size	ro	Acreage	, 330
	☐ Is Property Creek or Lan	/Land withir dward side o	☐ Is Property/Land within 300 feet of Rive Creek or Landward side of Floodplain?	☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)  Creek or Landward side of Floodplain? If yes.—continue.—▶	ent) Distance Structure	ucture is from Shoreline	eline :		Is Property in Floodplain Zone?	Are Wetlands Present?
Jonoreland —	☐ Is Property	/Land within	1000 feet of Lak	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage  If yes—continue	Distance Str	Distance Structure is from Shoreline :fee	eline : feet		□ Yes	□ Yes ⊗ No
Value at Time					<u> </u>	1.1.0				
of Completion  * include  donated time &	Project		# of Stories and/or basement	s lemt Use	bedrooms	)+U/~ sew	wer/Sanitar, Is on the pro	Sewer/Sanitary System Is on the property?		Water
	XNew Construction	truction	▼ 1-Story	□ Seasonal	2 (F) (A)	☐ Municipal/City			1000 400	□ City
\$ 130,000	Conversion	->					dists) S	pecify Type:	SEPTIC	
		ness on	□ No Basement	ent V CACATE	None	□ Portable (w/service cont	/service	contract)		Weser
	]					None				14 07.35
Existing Structure:	(if permit bei	ng applied fo	(If permit being applied for is relevant to it)				•		Height:	1
Proposed Construction:	ion:			Length:	30			I	He ght:	14
Proposed Use	<b>-</b>	Delection	C+110+110 /firs+	Proposed Structure	icture		-	Dimensions	ons	Square Footage
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Residential Use	* *		with a Porch					r v v		ર્જ
			with (2 <sup>nd</sup> ) Porch	rch		0.71.		× ×		2
			with (2 <sup>nd</sup> ) Deck	ck			<u>                                   </u>	×	- \	
Commercial Use	se		with Attached Garage	d Garage			-	×		
		Bunkhous	se w/ (□ sanitar)	Bunkhouse w/ (☐ sanitary, or ☐ sleeping quarters, or	□ cooking	& food prep facilities)	(s)	« ×	_	-
		Addition/	Addition/Alteration (specify)	(specify)				×		
Municipal Use	I I	Accessor		(specify)				×		
Rec'd for Issuance	Ce	Accessor	Accessory Building Addition/Alteration		(specify)	appear of the first of the firs		. ×	_	
250 NO COT NO CO		Special U	Special Use: (explain)	William Community (Market Community		in the second se		×		
		Condition	Conditional Use: (explain)		<u> </u>	Associate was to a second	- -	×	_	-
Secretarial Stati	L	Otner: (explain)	(piain)		THE PARTY OF THE P	Data and Anna Continue	-	>	,	

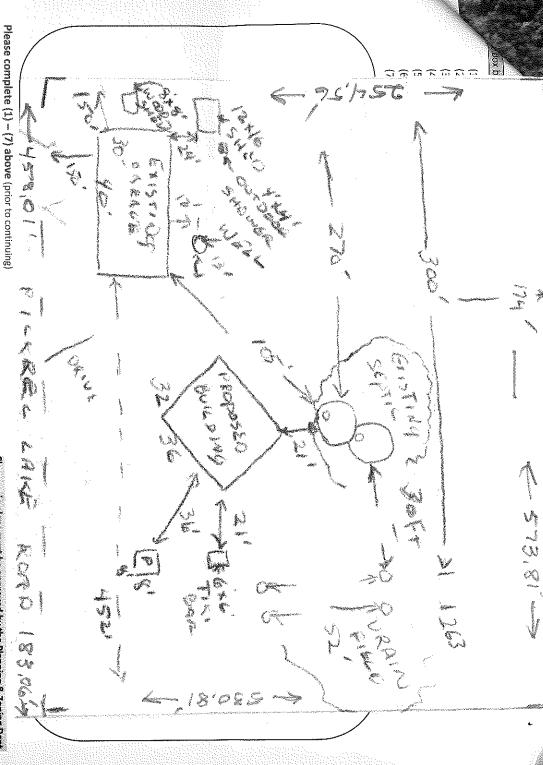
Authorized Agent: Owner(s): S FAILURE TO OBTAIN A PERMIT or STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any beasonable time for the purpose of inspection. (If there are Multiple on Deed All ( ners must sign <u>or</u> letter(s) of a accompany this Date Date J-15-1 3

(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Ext.

Address to send permit



Changes in plans must be approved by the Planning & Zoning Dept.

previously supreved corner to the	the control because the control of t	*	details and an	[7]	
	The second secon		Feet	Setback to Privy (Portable, Composting)	
	The state of the s		50 Feet	Setback to <b>Drain Field</b>	
Feet	Setback to Well		つ\ Feet	Setback to Septic Tank or Holding Tank	
					14.14 14.14 14.14
Feet	Elevation of <b>Floodplain</b>		(%) Feet	Setback from the East Lot Line	
☐ Yes ☐ No	20% Slope Area on property		D(D Feet	Setback from the West Lot Line	
Feet	Setback from Wetland		Joo Feet	Setback from the South Lot Line	
	AAAAA		375 Feet	Setback from the North Lot Line	: : :, 1
Feet	Setback from the Bank or Bluff				
Feet	Setback from the River, Stream, Creek		Feet	Setback from the Established Right-of-Way	
Feet	Setback from the Lake (ordinary high-water mark)		Feet	Setback from the Centerline of Platted Road	
	500000000000000000000000000000000000000			ALICENSIA SERVICE SERV	
Measurement	Description		Measurement	Description	
			est point)	(8) Setbacks: (measured to the closest point)	

Prior to the placement or construction of a structure within ten (10) feet of the minimum req other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

## (9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Hold For Sanitary:	Signature of Inspector:	Condition(s):Town, Committee or Board Conditions Attached? □ Yes □ N# (If No they need to be attached.)	Date of Inspection: 8 23:46 Inspec	Inspection Record:	Was Parcel Legally Created XYes □ No Was Proposed Building Site Delineated XYes □ No	Granted by Variance (B.O.A.) □ Yes ▼No Case #:	Is Parcel a Sub-Standard Lot U Yes (Deed of Record) Is Parcel in Common Ownership U Yes (Fused/Contiguous Lot(s)) Is Structure Non-Conforming U Yes	Permit # 1/6 -0878 Permit	Permit Denied (Date): Reaso	Issuance Information (County Use Only) Sanita
Hold For Affidavit:		□ <b>Yes</b> □ <b>N6</b> -(If <u>No</u> they need to be attached.	Inspected by: 97		Were Property Lines Represented by Owner Was Property Surveyed	Previously Gramted by Variance (B.O.A.)	翼No Mitigation Required 口Yes 到No Mitigation Attached 口Yes	Permit Date: 8-26-16	Reason for Denial:	Sanitary Number: 07-355
Hold For Fees:	Da		Date o	Zoning Lakes C	Represented by Owner <b>TYes</b> Was Property Surveyed <b>PYes</b>	ance (B.O.A.) Case #:	Z.No			# of bedrooms: Sanitar
	Date of Approval:		te of Re-Inspection:	Zoning District ( $\angle Z$ ) Lakes Classification ( )	□ No		Affidavit Required   Yes ANO			Sanitary Date:

Carmody abous Septic (07-355)

® October 2013

SURMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** 

Washburn, WI 54891 (715) 373-6138

Planning and Zoning Depart. PO Box 58 APPLICATION FOR PERMIT
BAXFIELD COUNTY, WISEONS
old Stamp (Received)
AUG 08 2016

Rotino.	Amount Paid:	Date:	Permit #:
	%-% %-% %%	\\\\ \?-30 <i>1/6</i>	16-0283

Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid.
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TOO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED

Non-Shoreland	Shoreland	☐ Is Property/Land within 300 feet of River, Stream (Ind. Intermittent)  Creek or Landward side of Floodplain?  If yescontinue —▶	Section 18, Township HPS N, Range 9	NE 1/4, SE 1/4 Gov't lot 6	N Legal Description: (Use Tax Stateme	PROJECT	Authorized Agent: (Person Signing Application on behalf of Owner(s))	DALOS OAMPONIES OR ME.	Address of Property: BANGO TEAL		TYPE OF PERMIT REQUESTED—>   III LAND USE SAI
	ke, Pond or Flowage If yescontinue —	er, Stream (ind. Intermittent)  If yescontinue	w Town of: BARIES	CSM Vol & Page	304-2-45-09-	PIN: (23 digits)	Agent Phone:	Contractor Phone:	City/State/Zip: BARNES, W/, 54873	Mailing Address; 49/	UITARY □ PRIVY □
	Distance Structure is from Shoreline :	Distance Structure is from Shoreline:	llas	Lat(s) No. Block(s) No.	304-2-45-09-17-400-136-13000		Agent Mailing Address (include City/State/Zip):	Plymber: DeRJEMAN	54873	City/State/Zip:	☐ SANITARY ☐ PRIVY ☐ CONDITIONALUSE ☐ SPECIALUSE
	4		Lot Size	Subdivision:  BASEMMA	Volume	Recorded Docume	State/Zip):	a de la comunicación de la comun		40 Z	JALUSE ☐ B.O.A.
		Is Property in Are Wetlands Floodplain Zone? Present?	Acreage GAUDO	subdivision: BARKMAUK Addition	Page(s)	<b>Document:</b> (i.e. Property Ownership)	Written Authorization Attached  yes No	Plumber Phone:	Gell Phone: 953-6294	Telephone: 052_ 941-253(ff)	J.A. G OTHER

Value at Time of Completion					#	Wha	What Type of	
*include	Project	T T	and/or basement	Use	of	Sewer/Sanitar	mitary System	Water
donated time &					nem nome	والمتارين	ic property:	
And the second	☐ New Construction	ruction	☐ 1-Story	□ Seasonal	□ <b>1</b>	☐ Municipal/City		☐ City
3 4,4 5° 24 5 T	Addition/Alteration	Iteration	1-Story + Loft	Year Round	2	(New) Sanitary Specif	Specify Type:	® Well
	☐ Conversion		2-Story		□ 3	🛮 Sanitary (Exists) Speci	fy Туре: <u>, Ѕ<i>еОт! ѝ -</i></u>	
	Relocate (existing bldg)	tisting bldg)	☐ Basement			□ Privy (Pit) or □	J Vaulted (min 200 gallon)	24.5.3.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.5.
	🗆 Run a Business on	ess on	○ No Basement		□ None	□ Portable (w/service con)	ce contract)	
77	Property		☐ Foundation			Compost Toilet	THE PROPERTY OF THE PROPERTY O	
						□ None	A CONTRACTOR OF THE CONTRACTOR	
Existing Structure: (If permit being applied for is relevant to it)	f permit bein	g applied for	is relevant to it)	Length: 24		Width: Z.C.	Height: ZZ	
Proposed Construction:	on:			Length:		Width: 19	Height Ag & Oct	100
Proposed Use	<b>~</b>		1	Proposed Structure			Dimensions S Fi	Square Footage
		Principal 9	Principal Structure (first structure on property)	ure on property)		warding depth of the control of the	X	
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Residential Use			with a Porch	and a second		The state of the s	( X	
			with (2 <sup>nd</sup> ) Porch				×	
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- Gernander State of the control of	fice		with Attached Garage	age			( x	
		Bunkhous	<b>Bunkhouse</b> w/ ( $\square$ sanitary, or $\square$ sleeping quarters, or $\square$ cooking & food prep facilities)	sleeping quarters, <u>c</u>	r □ cooking &	ι food prep facilities)	×	
AC 30 216	<u></u>	Mobile H	Mobile Home (manufactured date)	e)				R
	X	Addition/	Addition/Alteration (specify)	NOW AWK			×	
1S-RIPUPHENESI		Accessory Building	Building (specify)				×	
****************		Accessory	Accessory Building Addition/Alteration (specify)	teration (specify)	,	annest de la constant	×	
ふこう								
		Special Us	Special Use: (explain)	A CONTRACTOR OF THE CONTRACTOR	- Company of the Comp	www.mannamphage.ic	( x )	
Q.		Condition	Conditional Use: (explain)			LE LANGUAGE	×	
							_	

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

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am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which
may be a result of Bayfield County relying on this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the
above described property at any reasonable type for the purpose of inspection.

Owner(s):

Owner(s):

Owner(s):

Date

To Owner(s):

Other: (explain)

×

**Authorized Agent:** (If you uare signing on behalf of the o wher(s) a letter of authorization must acc ny this application)

Address to send permit - BARROS TOWN EI

0 

Date

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE Attach
Copy of Tax Statement
y purchased the property send your Recorded Deed
AFRICAN 452-683-684
AFRICAN 452-683-684
AFRICAN 452-684

الاي